

ART. XIX.—*Reports of American Institutions for the Insane.*

1. *Of the New York State Lunatic Asylum, for 1857.*
2. *Of the New York City Lunatic Asylum, for 1857.*
3. *Of the New Jersey State Lunatic Asylum, for 1857.*
4. *Of the Friends' Asylum, Philadelphia, for 1857.*

1. FROM the report of the New York State Lunatic Asylum, we take the following summary of the medical history of that institution during the fiscal year terminating with the 30th of November, 1857:—

	Men.	Women.	Total.
Patients at the beginning of the year	231	230	461
Admitted in course of the year	129	106	235
Whole number	360	336	696
Discharged, including deaths	122	123	245
Remaining at the close of the year	238	213	451
Of those discharged, there were cured	41	54	95
Died	24	8	32

Causes of death.—Exhaustion from mental disease, 12; phthisis pulmonalis, 8; epilepsy, 4; general paralysis, 3; apoplexy, 2; suffocation, 1; phlebitis and metastatic abscesses, 1; typhoid fever, 1.

In each of the cases of general paralysis (*paralyse générale*), "the disease brought to its close a life of long-continued intemperance and debauchery." The death by suffocation was that of an aged and feeble man. "In taking his food voraciously, a piece of meat lodged in the pharynx, and death took place before assistance could be rendered."

"It is gratifying," says Dr. Gray, "to be able to record a decided improvement in the condition of patients at the time of their admission. Only a few had been bled and reduced by a depressing course of treatment, and nearly all (the exceptions being a few among those transferred directly from the county-houses) gave evidence of careful and humane treatment."

Of the 235 patients received in the course of the year, 199 were admitted for the first time, 24 the second, 7 the third, and 5 the fourth. Twenty of those who were readmitted had formerly been discharged cured.

"In the list of discharges, eight males and two females are recorded as not insane. Five of these were drunkards; one was a case of eccentricity, with strong mischievous and vicious propensities; two were cases in which insanity had been successfully pleaded in defence against criminal charges; and two were imbeciles."

As parts of the scheme of moral treatment, we learn from the report that "a large number of entertainments, theatrical and social concerts, lectures, and addresses have been given during the year. The anniversary of the opening of the institution and the national anniversaries were celebrated in the usual manner. All of these have been under the entire management of the patients themselves, who, in the necessary preparation, have exhibited a great deal of ingenuity, taste, and talent. Several very fine pieces of scenery have been painted by an artist recently returned to his friends; and to the same gentleman we are indebted for a new drop-scene for the stage, and a large number of portraits and sketches for the decoration of the halls. The music for all our entertainments has, as usual, been furnished by the 'Asylum Band.'"

Patients admitted from January 16th, 1843, to December 1st, 1857	5065
Discharged cured	2112
Died	605
Not insane	34

In conformity with a legislative act, the insane convicts of the State were removed to this asylum during a period of eight years, terminating in 1854.

The number thus transferred was 67. Fourteen of them, according to the report, were feigning insanity. Of the remaining 53, the form of disease was: Acute mania, 1; chronic mania, 5; periodic mania, 1; paroxysmal mania, 1; melancholia, 1; dementia, 41; general paralysis, 2; imbecility, 1.

The case of melancholia, that of periodic mania, and three of the cases of dementia, recovered.

"It is a significant fact," remarks Dr. Gray, "that, for the period of eight years, but one case of acute mania was sent from our State prisons. These statistics show that the form of mental disease most likely to occur among this class is dementia. We have here forty-one cases of this form in fifty-three cases of insanity! Their individual history shows further, that in nearly all, the process of sinking into dementia was gradual, and not the sequence of neglected or violent mania, a fact confirmed by my personal visits to the prisons, and information given me by their officers. Few convicts become insane from the operation of moral causes."

Of the fourteen cases of simulated insanity, mania was feigned in three, and dementia in eleven.

Aside from these convicts, eighty-six persons have been sent to the asylum by order of judges and justices, as "criminal and dangerous lunatics." It was found that twelve of them feigned insanity, two others were not insane, and four were imbeciles. "Of the twelve feigning insanity, ten simulated dementia, and two mania."

Of the 68 who were really insane, the form of disease was, acute mania in 12; subacute mania, 3; chronic mania, 14; periodic mania, 3; paroxysmal mania, 4; puerperal mania, 1; dementia, 26; mania, with epilepsy, 2; dementia, with epilepsy, 2; general paralysis, 1. Twenty-one of these have been discharged recovered, and ten have died.

"Among the crimes recorded as committed are 22 murders and 14 arsons. Of the former, 10 were committed by persons labouring under dementia, 2 by demented epileptics, 2 had acute mania, 1 subacute, 4 chronic mania, 1 was an imbecile, and 2 feigned insanity as a means of escape. Nineteen were males, and three females.

"Of the 14 acts of incendiarism, 4 were by persons labouring under dementia, 2 by epileptics, 1 by an imbecile, 2 by cases of acute, 2 of chronic, and 1 of puerperal mania, and 2 by persons not insane. Eleven of these were males and three females."

In July, 1857, the buildings of the asylum suffered serious detriment from two conflagrations. Upon the 14th, the large central building of the front edifice was entirely destroyed (the outer walls alone being left standing), together with about ninety feet of the roof and a portion of the attic of the wing occupied by the female patients. No patient was either destroyed or injured; but Dr. Lauren F. Rose and Mr. William Cessford, a fireman, both resident in Utica, were killed. "Both fell in the heroic discharge of duty. The latter was completely buried in the ruins of the falling roof; and when his remains were found, the charred hands still clutched the vessels with which he was labouring to control the fire."

Upon the afternoon of the 18th, the barn, a stone building 100 feet long and 47 feet wide, was also destroyed, with the exception of the outer walls.

These disastrous fires were the work of an incendiary—a man who had formerly been a patient in the asylum, but who was discharged in February, 1856, and during most of the subsequent period had been an employee, "working the greater part of the time in the dining-room and in the printing office. He was also employed as a nurse." "The fire in the barn was kindled in the loft, and that in the asylum was kindled in the large foul-air flue leading from the north wings, where it passed through the main attic, over the ceiling of the chapel, to the cupola. There was a door entrance to the flue, through which he passed and set fire to a temporary wooden box within, which was intended to connect the ventilation of the chapel with that flue."

The managers of the asylum accord great credit to Dr. Gray and his assistant physicians, for their energy, prudence, and good management, under the trying circumstances of their position, during the conflagration of the 14th.

Measures were immediately taken for the reconstruction of the central edifice, and at the time the report was written, it was far advanced towards completion.

2. The general results for the year 1857, at the New York City Lunatic Asylum, are indicated by the subjoined numbers.

	Men.	Women.	Total.
Patients on the 1st of January . . .	252	345	597
Admitted in course of the year . . .	130	196	326
Whole number " . . .	382	541	923
Discharged, including deaths . . .	131	165	296
Remaining on the 31st of December . .	251	376	627
Of the patients discharged, there were cured			152
Died			75

The diseases in two of the cases cured was delirium tremens. Six cases discharged "unimproved" were "improper subjects."

Causes of death.—Consumption, 25; paralysie générale, 7; chronic diarrhœa, 6; typhomania, 6; submersion, 4; senectus, 4; epilepsy, 3; paralysis, 3; inflammation of the brain, 3; congestion of the brain, 2; inflammation of the lungs, 2; disease of the heart, 2; hemiplegia, 2; apoplexy, 1; hæmoptysis, 1; peritonitis, 1; albuminuria, 1; dropsy, 1; dysentery, 1.

A large part of Dr. Ranney's report is occupied by a description of the disciplinary and moral regimen pursued in the asylum. His general scheme is nearly identical with that which prevails at all other well-regulated institutions of the kind; and as this must be pretty well understood by our readers, it is unnecessary, in this place, to enter at large upon the subject. We quote some of the remarks upon seclusion and mechanical restraint.

"Our rule is, never to punish a patient. If one be violent or noisy, he is shut in a room, with a distinct understanding that others shall not be annoyed; and soon, if promises be given of better conduct, he is again allowed the liberty of the hall; which course is repeated as occasion may require. During the past year, with an average of 618 patients, not more than four daily have been confined in their rooms.

"Our apparatus for restraint consists of the camisole, muff, common restraining (belt and wrist?) strap, and bed strap. Of these, the first two are most frequently used, principally to prevent females from removing their clothing; the restraining strap most rarely, that the patient may be unable to injure himself or others; while to obtain the quietude necessary for sleep, the bed strap forms the only mode of restraint. This embraces all and every means of restraint; and the daily average of any application of this kind does not exceed one, among two hundred inmates."

When reviewing the last report from the Eastern Kentucky Lunatic Asylum, we made some remarks upon the ability of the insane to control their erratic and wayward tendencies and impulses, under the stimulus of a sufficient motive or other inducement. The following extract both confirms and illustrates the truth of the position which was there assumed:—

"There are certain inducements held out to the insane, to which it may be proper to refer; the number being small who are unable in some degree to exercise self-control over their ordinary acts. A patient is told that if his conduct be good, he will have associates of a like character, and certain privileges not otherwise allowed, besides giving great weight in his favour in the final decision of his condition of mind. The following illustrates this principle:—

"Some months since, a young man was admitted who for weeks had disturbed by night his neighbourhood with loud prayers. He frankly confessed the truth, and stated that the same course would be pursued, as he had committed a sin of great enormity. Secret prayer was suggested, but the proposition was declined. He was then informed that there were two classes of inmates—the one, quiet, the other, noisy; and should he persist in his resolution, he would be placed among the last named, that the sick and quiet might be undisturbed. On deliberate reflection, he concluded to make the trial, and for one night to remain with the quiet. The following formal compact was finally adopted:—

"1st. That he should not disturb the house for one night, and that one day's notice of a change of intention should be given the physician.

"2d. That the physician accord to him the privilege of remaining in the best part of the house, until the notice be received, and also permission to make daily a short exhortation.

"The result was, that no notice was ever given on his part; he became quiet at night; the daily exhortation continued a few weeks, then was wholly omitted; and he is now perfectly well."

The report contains the programme of the last Christmas entertainment for the patients. It consists of three parts. Part First includes an overture by the band and five songs, between the second and third of which, "*Santa Claus makes his entrée with presents.*" Part Second consists of a pantomime in seven scenes; and Part Third, of an overture, five songs, dancing, and a fairy dance as the "Grand Finale." Beside Christmas, four other days are annually observed as holidays, upon which entertainments are given.

Of the 258 patients admitted in the course of the year, 157 were natives of Ireland, 55 of Germany, 14 of England, 11 of Scotland, and 21 of twelve other foreign countries and their dependencies. Only 68 were natives of the United States; and of these, but 40 were born in the State of New York.

The establishment has been vastly improved within the past year, by the construction of a separate building for kitchen, laundry, the heating of all the water for the halls, and the generation of steam, which has been substituted for furnaces, grates, and stoves, in warming the apartments of the asylum.

3. The summing up of the records for 1857, at the New Jersey State Lunatic Asylum, furnishes the following results:—

	Men.	Women.	Total.
Patients on the 31st of December, 1856	124	139	263
Admitted in course of the year	75	91	166
Whole number " "	199	230	429
Discharged, including deaths	64	86	150
Remaining December 31st, 1857	135	144	279
Of patients discharged, there were cured	26	30	56
Died	11	13	24

Causes of death.—General exhaustion of the system from chronic disease, 13; exhaustion from acute mania, 3; congestion of the lungs, 2; suffocation by food lodged in the trachea of a paralytic, 1; consumption, 1; softening of the brain, 1.

The larger part of Dr. Buttolph's report consists of "Remarks on the Nature, Causes, Means of Preventing, and General Principles of Treating Insanity." We shall select from this such portions as appear to us most worthy of the attention of our readers.

"A degree of confusion often arises in regard to the true nature of insanity from the language of statutory or legal definitions, which have been made and interpreted to embrace only or mainly those cases of mental disorder in which the intellectual faculties are specially at fault. In this way, the whole class of cases of mental disorders in which disturbed and deranged feeling is the leading symptom, and popularly, though inaccurately, called 'moral insanity,' is brought into disrepute, or wholly ignored by courts and jurists.

"In estimating the responsibility of an individual whose character and conduct have been changed by disease of the brain, no difference is made by practical observers and writers on account of the locality of the disease in that organ, or of the class of faculties, whether intellectual or affective, that are most involved. While the daily and hourly experience of medical men connected with the care of the insane shows that the moral freedom, and therefore the responsibility of individuals, is as effectually and entirely abridged or suspended in these cases as if the intellect was deluded or most disturbed, no amount of authority from musty codes, of special pleading, or sarcastic ridicule from any quarter, can change the simple facts, and legislators, courts, and

communities should become accustomed to admit their existence, and thus lessen the danger of judicial murders, or the infliction of penalties upon insane and irresponsible victims.

"Of the mental and moral causes that predispose to mental disorder, none exert a greater influence for evil than the imperfect development and training of the different classes and individual faculties. These are constituted to be mutually dependent upon each other in working out the great problem of life. If the intellectual, the moral, or the animal group of faculties, or any individual belonging to either, is neglected in the educational training, or is cultivated too highly, or at the expense of the rest, the equilibrium of the mind is destroyed, and the individual thus rendered liable to be affected unduly by the exciting, depressing, or otherwise disturbing influences of life. Many, indeed most of the systems, or rather plans of educational training in vogue are defective in this respect, that they do not embrace a correct and comprehensive view of the constitution and wants of the mind. In the first place, educators too often practically ignore the fact that mind, in this life, is directly dependent for its vigorous and healthy action upon the perfect development and healthy state of the brain, as its proper and only physical medium of manifestation. The consequence is, that efforts at mental culture are frequently made without reference to the plainest laws of health, and hence frequently result in the failure of the health, happiness, and usefulness of the victim.

"Again, attempts are made to educate the mental faculties without sufficient reference to the wants of the animal feelings and higher sentiments of the mind; in many cases also, where one or other of these classes are relatively very strong or weak, and require the most careful and enlightened attention on the part of the educator to secure a harmonious balance in the different mental forces.

"In harmony with the views here presented, we regard attention to all those means calculated to aid the full development of the brain, and establish the proper activity and strength of the faculties, as the most efficient and reliable means for preventing insanity.

"We would have the system of education adopted include such general instructions in regard to man's physical system as to enable him to conform in practice to the laws of his being. * * * * The next step is to acquire a knowledge of the nature, number, and office, separate and combined, of the faculties of the mind; this being alike indispensable to self-government and to a correct and consistent view of man's true relation to all external objects and beings. When this knowledge is attained, he is prepared to receive such impressions in regard to the relations, legitimate aims, and ends of life, as will enable him to meet and bear the trials incident thereto with Christian fortitude and patience. Instead of repining and withering under what appears to the ignorant and undisciplined as mysterious dispensations of Providence, he sees only the movements of a comprehensive system of changes and events designed by a master-mind too wise to err and too good to be unkind.

"The tranquillity of a mind thus enlightened and submissive, in regard to the current events of life, can scarcely be disturbed by petty annoyance or overcome by serious calamity; as, by aid of its ruling principle, or 'philosopher's stone,' the unmanly and unchristian term 'trouble' is changed to *business*, and the external world about him, often regarded and called a gloomy 'vale of tears,' from which he is to pray for a safe, if not early exit, becomes what the Creator intended it should be—a bright and beautiful sphere where all his powers, inspired by hope, shall be developed and tried, and thus prepared for entering upon a future state of unlimited growth and of unmixed felicity."

4. The Forty-first Annual Report of the Friends' Asylum, at Philadelphia, Pa., contains the following record of the movements of the patients at that institution during the fiscal year terminating with the close of February, 1858.

	Men.	Women.	Total.
Patients in the asylum March 1st, 1857 . . .	29	29	58
Admitted in the course of the year . . .	18	23	41
Whole number " " " " . . .	47	52	99
Discharged, including deaths . . .	18	19	37
Remaining Feb. 28th, 1858 . . .	29	33	62
Of those discharged, there were cured . . .	9	10	19
Died . . .	5	2	7

Died from the exhaustion of acute mania, 4; effusion at the base of the brain, 1; chronic meningitis, 1; phthisis pulmonalis, 1.

"One had been in the asylum three days; one eight days; two about one month; one about four months; one two years; and one thirty-one years on his last admission."

Dr. Worthington thus expresses his views of the effect of insanity upon the general health and longevity of persons attacked by it.

"There can be no doubt that insanity, in many cases, is complicated with physical disorders which tend to shorten life. In a considerable number of cases, even where it is not complicated with any appreciable structural disease, the patients sink, in periods varying from ten to thirty days, from exhaustion produced by intense excitement and the almost absolute want of sleep. In cases of this kind, the individual has generally experienced some severe shock to his nervous system or been suffering under some prolonged weight of mental distress, which appears completely to have broken down his recuperative energies. But after the acute stage has passed without reason being restored, and patients have settled into a state of chronic insanity, the physical health generally becomes re-established; and then, if placed under circumstances favourable to its continuance, the insane have, perhaps, as fair a prospect of long life as persons in the possession of all their faculties. In an institution where all their wants and comforts are properly attended to, without care or thought on their part, they may indeed be considered as less subject to the various causes of acute disease than the world at large, and probably enjoy quite as good physical health.

"These remarks are fully exemplified by the comparative condition of the two classes of patients in the asylum, almost the whole of the severe cases of illness that occur being furnished by patients recently admitted; while the more permanent residents of the asylum seldom require the use of medicine. Among this class of patients, during the past year, the usual general good health has prevailed, only one death having occurred—a man more than eighty years of age, who had spent nearly half his life in the institution."

It appears to us that these views are very accurate as derived from observation of the disease at the institution whence this report emanates. A writer whose experience had been gained in some of the other American hospitals, could hardly have failed to add to the above that the chronic insane yield more easily than the average of persons enjoying mental health to the influence of the more violent of epidemic diseases. Attacks are relatively more numerous, and the mortality is greater. Those patients are deficient in the self-preserved power, the nervous energy, the *vis vitæ* which effectually prevents an attack by the epidemic agent, or obtains the victory over it if an attack has been made.

The institution under the care of Dr. Worthington presents perhaps the maximum of conditions promotive of general health and longevity. It does not receive paupers. Its patients have never suffered, previously to admission, from a deficiency of wholesome food. In very few of them has the constitution been shattered or weakened by intemperance. The hygienic condition of the asylum has always been good. The number of cubic feet inclosed by its walls is large in proportion to the number of patients. Its inmates have probably never had the opportunity of attacks from diseases resulting from deficiency in the quantity of food, or inferiority in its quality, or from prolonged humidity or impurity of air. Scorbutus, we apprehend, was never seen within its walls, and erysipelas, as well as fevers of the typhoid type, very rarely. If

we are not mistaken, no severe epidemic has ever visited it, to try the resistant vitality of its chronic patients, and to decimate their number. For these, and for still other reasons, among the deaths in chronic cases at this institution there has been, for many years, and doubtless there will still continue to be, a comparatively large number in which the patients have attained a very advanced age.

	Men.	Women.	Total.
Patients admitted since the asylum was opened	699	663	1362
Discharged, cured	324	291	623
Died	97	91	188
From 20 to 30 years of age when admitted	218	187	405
“ 30 “ 40 “ “ “ “	107	135	242
Of 572 patients received since 1842, there were between 20 and 30 years of age when first attacked	107	89	196
Between 30 and 40 years of age	54	55	109

The subjoined extract is from the remarks upon the treatment of the insane.

“Uniform *kindness and candour* in all our intercourse with them cannot too frequently be urged upon all concerned in their management, either within or without the walls of an asylum. One reason, perhaps, why deception is so often sought to be practised upon them is that they are supposed to be incapable of distinguishing between truth and fiction, and individuals are thus led, sometimes with good intentions, to practise what they suppose to be harmless deception, which they imagine the subject of it will never discover. While the insane are peculiarly sensitive to any want of respect towards themselves, and are frequently remarkably acute in penetrating the motives of others, they are easily won by real kindness and sincerity, which they quickly perceive can have no object but their own benefit. It is only by this kind of treatment that their confidence and respect can be secured, while deception is almost sure to be discovered, and visited by resentment and dislike.”

Dr. Worthington, having recently had an opportunity of observing the management of the insane in some of the European countries, makes the following remarks upon the subject of corporeal restraint:—

“In most of the institutions visited in England, including several of the larger asylums, the mildest system of restraint seemed to be employed—carried to the extent of the entire disuse of all forms of instrumental restraint. This may, indeed, be said to be general in all the county asylums in England; and whatever we may think of the advantage of the ‘non-restraint system,’ its possibility is no longer doubtful. It was certainly interesting to witness, at Hanwell, with its 1200 patients, the practical working of the system; and while we may applaud the spirit of improvement and genuine philanthropy that led to its introduction there, and may be willing to admit that the nearer we approach to it in the general management of the insane the more is their condition elevated and improved, we may yet well doubt the wisdom of absolutely rejecting, under all circumstances, a remedy that might, by any possibility, be found useful.”

P. E.

ART. XX.—*A Treatise on the Practice of Medicine.* By GEORGE B. WOOD, M. D., Professor of the Theory and Practice of Medicine in the University of Pennsylvania, etc. etc. 2 vols. 8vo. Fifth edition. Pp. 888–904. J. B. Lippincott & Co.: Philadelphia, 1858.

THE demand for five editions of the work of Dr. Wood, within the comparatively short space of eleven years, is sufficient evidence of the correct appreciation by American physicians of the professional productions of their own countrymen, when of a character similar to that of the treatise before us.

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Comprehensive, clear, and exact in all its teachings, and presenting in its successive editions a fair and full exposition of our knowledge in reference to the pathology and therapeutics of the various diseases of which it treats—comprising all such as are liable to fall under the notice of the practitioners located in different portions of the United States—we know of no systematic treatise on the practice of medicine, in the widest signification of the term as now understood, which is better adapted as a work of reference to the physician actively engaged in the engrossing duties of his profession, or through the pages of which, the advanced student will be presented with better delineated and more truthful pictures of diseases, or sounder and more explicit practical directions for their management.

D. F. C.

ART. XXI.—*Guy's Hospital Reports*. Edited by SAMUEL WILKS, M.D., and ALFRED POLAND. Third Series, Vol. III. London, 1857. 8vo. pp. 513.

THE first volume of *Guy's Hospital Reports* was edited by George H. Barlow and James P. Babington, in 1836. Impressed with the importance of recorded experience in the advancement of medical knowledge, they determined to contribute to the general stock a collection of facts drawn from the largest repository of disease in London. They supposed, also, that it was incumbent upon them, and upon all who have enlarged opportunities of witnessing disease and its treatment, to collect and record their observations, that they may be preserved from oblivion and transferred to the common stock of knowledge. A volume of great value has appeared almost every year since the publication was commenced.

Guy's Hospital is the largest in London; it contains within its wards a constant succession of above five hundred patients; thus amounting in the year to between three and four thousand. These patients are not admitted at the recommendation of managers, but they are selected by the attending physicians and surgeons as those whose diseases are the worst and most acute, or the most interesting and instructive, amongst a concourse of patients who present themselves upon the regular days of admission. The out-patients prescribed for are no less than fifty thousand. The annual number of accidents admitted amounts to nearly six hundred. Records of all the cases admitted are kept by the senior students, who form a Clinical Society, of which some notice was given in the July number of this journal for 1844. With such material to be disposed of, with editors of ability and industry, *Guy's Hospital Reports* must be looked upon as among the most valuable contributions to our general stock of experience.

This volume contains twenty original communications, eleven wood-cuts, and nine lithographic plates. The following is an analysis of its contents:—

I. *A Report of Seventy-two Cases of Tetanus occurring in Guy's Hospital since the year 1825*. By ALFRED POLAND.

In the introduction to the first volume of the second series of *Guy's Hospital Reports*, the editors state that they purpose, in the new series, to illustrate the different classes of disease by the aid of series of *reports* collected within the walls of the hospital, and furnished by the books of the Clinical Society. Previously to that time their chief energies had been expended in giving to the medical world, in finished treatises, the inferences they deduced themselves from the observations collected. The very first report they published, which was upon the cases of hernia, was by the author of the one we are about to examine.

This paper of Mr. Poland's occupies eighty-eight pages. He commences by stating concisely *all* the cases which have occurred, which it is important to bear in mind, as recorded cases, generally, are those only having a successful issue. They are arranged as they occurred in the several years, giving the